

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/ 584-677

FILING DATE

6-27-06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	2					
4	2					
5	2					
6	2					
7	2					
8	2					
9	1					
10	1					
11	1					
12	1					
13	1					
14	2					
15	0					
16	0					
17	0					
18	0					
19	0					
20	0					
21	0					
22	1					
23	0					
24	1					
25	1					
26	1					
27	3					
28	1					
29						
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32						
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49						
50						
TOTAL IND.	5	↓		↓		↓
TOTAL DEP.	27	←		←		←
TOTAL CLAIMS	32					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.			↓			
TOTAL DEP.		←		←		←
TOTAL CLAIMS						